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APPLICANTS

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** CONTINUING DATA *****

CU

** FOREIGN APPLICATIONS *****

CU

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY MA	SHEETS DRAWING 5	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 2
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TITLE

Euclidean distance instructions

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